THE
TRAINING SCHOOL BULLETIN

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Research in Progress

A Survey of Mongolian Traits[1]

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The Mongolian type of mental deficiency has been described by many writers. But only a few have attempted to compare the traits which are common to Mongolians with the traits of persons who are not Mongolian. The purpose of this survey was to make such a comparison in order to evaluate the statistically "typical" traits of this category of amentia. Our interest was chiefly academic. We are interested in a more accurate description of the type than has hitherto been published.

A study of the textbook and journal literature showed contradictory statements regarding the characteristic traits of Mongolians. Although implying that the symptoms were specific and easily recognized, still the descriptions differed markedly with respect to the traits mentioned as characteristic. For instance, Tredgold[2] asserts that "The three anomalies most constantly present in Mongolism, and whose combination may be said to be characteristic of this condition, are of the skull, the eyes, and the tongue."

Shuttleworth and Potts[3] mention the "squat" nose in place of the tongue. They say: "With regard to the 'Mongol' type, the form of the head, the almond-shaped eyes, obliquely set, the epicanthic folds, and the squat nose, are characteristic."

1. Read before the American Association for the Study of the Feeble-Minded in Atlanta, Georgia, May 14, 1929. This abstract represents a portion of a monograph on Mongolism, which is soon to be published. The study was made with the assistance of Miss Harriet Barber, Miss Cecelia Gorsuch and Miss Helen Mansfield. Preliminary analysis of the data was made with the assistance of Miss Mansfield.
2. A. F. Tredgold, **Mental Deficiency** (New York: William Wood and Company, 1922), p. 243.
3. G. E. Shuttleworth and W. A. Potts, **Mentally Deficient** Children (5th ed.; Philadelphia: P. B. Blackiston's Son and Company, 1922), p. 141.

Another combination of traits is given by Davenport and Allen[1] who state: "But in the Mongoloids many traits are usually associated such as short appendages and fingers, narrow eyebrows, small eyeslits, dry skin, brachycephaly."

The most recent and comprehensive work on this subject by Brousseau and Brainerd[2] declares that: "The constant and disinguishing features are the small rounded head of the brachycephalic type, the round face and short flat nose whose bridge is broad and depressed with lax overlying skin which frequently extends over the eyes for some distance as epicanthic folds."

In order to substantiate our thesis that the description of Mongolism as yet has not been adequately set forth, we obtained the judgment of recognized authorities in this field as to the traits which they considered characteristic of the condition. A striking amount of disagreement was seen in the replies of the twenty-one competent persons who answered this request. Each authority offered an individual description of the type. In replying, each trait had been ranked in order of its importance in relation to the rest. A sampling of the disagreement is seen by comparing the traits ranked as of primary importance. One authority gave "extreme susceptibility to acute infection" as the trait of first importance; another mentioned the "narrow palpebral fissure which in nearly all cases is oblique" as of first rank; another made the general assertion that the "eyes" were the most characteristic; another considered "stubby fingers" of first rank; the next authority said "moderate mental retardation;" another, "peculiar facial expression;" still another, the "raucous, gutteral voice;" and so on.

From this examination of the literature supplemented by professional opinion, it is evident that the typical Mongolian can not yet be described except in classical phraseology as opposed to that which is scientific. A quantitative statement regarding the relative frequency of such traits should therefore be of scientific interest.

A list of 96 Mongolian traits was assembled in the form of a score card. Each trait was subdivided according to its various degrees of presence or absence in an individual, thereby making a total of 265 items which were used in checking the traits of each child. Observations were made by means of this scoring method,

1. C. B. Davenport and G. Allen, "Family Studies on Mongoloid Dwarfs," **Proceedings and Addresses of the Forty Ninth Annual Session of the American Association for the Study of the Feeble-Minded** (1925), p. 267.

2. K. Brousseau and H. G. Brainerd, **Mongolism** (Baltimore: Williams and Wilkins Company, 1928), p. 1.

supplemented by precise physical and cranial measurements, and by data relating to family and developmental histories.

An experimental group of 31 Mongolians and a control group of 31 non-Mongolian feeble-minded of similar sex, life age, mental age, and generally similar social status were scored and measured with respect to these items.

The number of cases is too small for statistical purposes, but the methodology employed gives results of significant value.

TABLE 1.

Distributions of 31 Mongolians According to Age, Mental Age, and I. Q.

AGE

Ages	5	10	15	20	25	30	35	40	45	Tot.
No. Cases	4	6	6	9	4	0	0	0	2	31
Median Age	19.6 years									

MENTAL AGE

Mental Ages	1	2	3	4	5	6	7	Tot.
No. Cases	3	6	7	6	4	4	1	31
Median M. A.	3.9 years							

INTELLIGENCE QUOTIENT

I. Q.	10	15	20	25	30	35	40	45	50	55	Tot.
No. Cases	1	4	8	2	3	3	4	5	0	1	31
Median I. Q.	31										

Table 1 shows the distributions and medians for age, mental age, and intelligence quotient of the 31 Mongolians. The subjects included 19 boys and 12 girls, aged 7 to 49 years and ranging mentally from 1 to 7 years. The following data were obtained. The results are here expressed in generalized form, but are of course limited to the cases studied.

Mentality. These Mongolians are typically low-grade imbeciles. One-half of this experimental group have mental ages between 3 and 5 years, with I.Q.'s between 21 and 41. The highest mentality in the group is almost 8 years (7.9 years to be exact). Nine cases are above a mental age of 5 years.

DESCRIPTIVE TRAITS. The frequency with which the well-known Mongolian traits occur among Mongolians is presented in Table 2, second column. The frequency of occurrence for these same traits among the non-Mongolian feeble-minded of similar age, mental age, and sex is found in the third column of this table. The differential value of each trait in positional series for the entire list of traits is given in the fourth column, with the ranks for the most significant first 9 traits staggered to the right of this column. (The method for deriving this differential rank is too complex for presentation here.)

TABLE 2.

COMPARATIVE FREQUENCY OF MONGOLIAN CHARACTERISTICS
31 Mongolians vs. 31 Controls

	CHARACTERISTIC	FREQUENCY		DIFFERENTIAL RANK
		Mong.	Controls	
1	Eyes slant up and out	30	10	41
2	Straight hair	30	24	75
3	Placid expression	28	5	33
4	Protruding abdomen	26	8	41
5	Almond-shaped eyes	25	0	1
6	Fissured tongue	25	3	27
7	Epicanthus	24	2	17
8	Puffy eyelids	24	2	17
9	Hyperflexible joints	23	1	9
10	Poor posture	23	15	65
11	Fissured lips	22	2	23
12	Flattened occiput	21	0	2
13	Drooped corners of mouth	21	2	25
14	Straight forehead	21	17	85
15	Irregularly formed teeth	20	7	47
16	Dry and chapped skin	19	1	13
17	Low-pitched voice	19	6	36
18	Wrinkled forehead	18	6	51
19	Depressed nasal bridge	17	0	3
20	Short fingers	17	2	31
21	Dry nails	17	2	31
22	Open mouth	17	10	65
23	Pointed tongue	16	0	4
24	Broad and thick tongue	16	1	20
25	Coarse voice	16	1	20
26	Unusually long tongue	15	0	5
27	Deeply fissured tongue	15	0	5
28	Hypotonic muscles	15	1	24
29	Fleshy cushions on shoulders	15	6	56
30	Transversely fissured tongue	14	0	7

It will be seen from this table that none of these so-called typical Mongolian traits occurs in all these Mongolians, although a few of them are totally absent among the Controls.

Slanted eyes and straight hair occur in all but one of the 31 Mongolians. But although slanted eyes is the most common trait among these Mongolians, this trait is also found in 10 of the Control cases. Straight hair which ranks with slanted eyes as the most common Mongolian trait occurs in 24 of the Control cases or with nearly the same frequency as for Mongolians. Placid expression occurs in 28 Mongolians and in 5 Controls. Protruding abdomen comes next, followed by almond-shaped eyes. The latter are found in 25 Mongolians but among none of the Controls. This now brings us to a consideration of the meaning of the column labeled "Differential Rank."

TABLE 3.

RANK ORDER OF DIFFERENTIAL TRAITS

1	Almond-shaped eyes
2	Flattened occiput
3	Depressed nasal bridge
4	Pointed tongue
5	Unusually long tongue
5	Deeply fissured tongue
7	Somewhat depressed nasal bridge
7	Transversely fissured tongue
9	Hyperflexible joints
10	Assumes tailor's posture
10	Shallow eyesocket
12	Very wide distance between eyes
13	Chapped hands
13	Dry skin
15	Many fissures in tongue
16	Thick lips
17	Epicanthus
17	Puffy eyelids
20	Thick tongue
20	Broad tongue
20	Course tongue
22	Small ears
23	Transversely fissured lips
24	Hypotonic muscles
25	Drooped corners of mouth
26	Lower jaw thrust forward
27	Fissured tongue
28	Bright red tongue
29	Protruding tongue
30	Shambling gait

Although slanted eyes are found in 97 per cent of the Mongolians, they are also found among 32 per cent of the non-Mongolian group. Differentially, such a trait can not be as important as would be a trait which occurred with a similar frequency in one group but

was totally absent in the other group. Almond-shaped eyes approaches this criterion, for it occurs in 80 per cent of the Mongolians but does not occur at all among the Controls. Differentially, as a Mongolian trait therefore, almond-shaped eyes is of more importance than slanted eyes, although it occurs less frequently than several other traits among the Mongolians alone.

Table 3 shows the order of the 30 most typical traits according to this method of differential ranking.

What is a typical Mongolian? "Typical" may refer to a condition which is of most frequent occurrence. Or a typical condition may be considered as a condition which differentiates one type from another. Table 2 has showed that the most common Mongolian characteristics are not differentially the most significant.

From Table 3 we see that as a *differential* condition the typical Mongolian is best described as having almond-shaped eyes, set in shallow and widely separated eye-sockets, with epicanthic folds and puffy eyelids. His bright red tonque is unusually long, thick and broad, pointed at the end when protruded, with many deep transverse fissures, and usually protrudes from the mouth. His lips are thick and transversely fissured, the corners of the mouth are drooped, and the lower jaw is thrust forward. He has a depressed nasal bridge, flattened occiput, small ears, hypotonic muscles, hyperflexible joints, and when asked to be seated he sits tailor fashion. The hands of the Mongolian are dry and chapped, his voice is coarse, and his gait is described as shambling.

TABLE 4.

COMPARATIVE PHYSICAL MEASUREMENTS

	MEDIAN MEASURE		MEDIAN AGE		MEDIAN PERCENTILE	
	Mong.	Control	Mong.	Control	Mong.	Control
Standing Height	1420mm.	1585mm.	12.0	16.0	3	36
Sitting Height	800mm.	805mm.	13.5	13.5	5	18
Weight	45.5 kg.	48.0 kg.	14.5	15.5	22	61
Cranial Content	1185cc.	1308cc.	6-	11.0	2	19
Cephalic Index	84	78				

MEASURED TRAITS. Certain physical measurements of these Mongolians and Controls gave results as in Table 4.

This table shows that Mongolians are shorter than non-Mongolian feeble-minded children of similar age and grade. On the average this experimental group is as tall as normal 12-year-old children, although they average about 19 years of age. The Controls however, are as tall as 16-year-old children. Sex differences are also found; the boys of both groups more nearly approximate normal height than do the girls.

Mongolians have longer trunks than ordinary feeble-minded children as seen in the difference between measurements of standing height and sitting height when compared to those of the Controls.

Considering their height, these Mongolians are overweight, whereas the Controls as a group are relatively less so. The girls are even heavier than the boys.

Head measurements of 19 of these Mongolians show that they approach microcephaly in cranial capacity. Their heads are exceedingly small in relation to their age as well as in relation to their body size. This group of 19, who as a group are approximately 20 years of age, and who physically are comparable to 13-year-old children, nevertheless, have cranial capacities less than those of normal 6-year-old children. The cranial measurements of their Controls, however, are average for 11-year-old children.

Although Mongolians have been termed microcephalic by some writers because of their small head size, they are not strictly microcephalic. They only approach this condition. Both size and shape of head must be considered, and the shape of the head and especially the shape of their forehead is not such as accompanies classical microcephaly. This, coupled with the fact that their cranial volume falls within the borderline between definite microcephaly and normality, rules out microcephaly as a Mongolian trait. With respect to shape, 90 per cent of their heads are brachycephalic, whereas less than half of the feeble-minded Controls have brachycephalic heads. They have shorter, somewhat flatter, and narrower heads than the non-Mongolian feeble-minded of similar grade and age.

Disposition. Systematic scoring of a series of dispositional and behavior traits did not show significant differences between the experimental and Control groups. Subjectively, however, the observers recognized such differences. They agreed that the personal-social behavior of Mongolians was decidedly superior to that of the other feeble-minded children of equal life age and mental age.

TABLE 5.

Comparative Parental Ages

	Mongolians	Controls
Mothers' Age	34	30
Fathers' Age	38	31

Comparative Position in Family

	Mongolians	Controls
Median Siblings	4	5
Last born	60%	36%
First born	20%	32%

History Data. The mothers of these Mongolians were from 4 to 5 years older at birth of these children than mothers of the Control group. These mothers did not give birth to these Mongolian children at any common age, although six times as many Mongolians as Controls were born after the mother had reached 40 years of age. The typical mother of these Mongolians was 34 years old at birth of the child, while the typical mother of the Control cases was 4 years younger, namely about 30 years of age.

The typical father of these Mongolians was 38 years old at birth of the child, whereas the typical father of the Control children was 7 years younger, namely 31 years old.

A greater proportion of these Mongolians than Controls are last born children in their families. Furthermore, they are members of somewhat smaller families, for 60 per cent of them were the last born in families ranging in size from 1 to 8 children, whereas 36 per cent of the Controls were the last born in families of from 1 to 12 children.

With respect to the nationality of these children there does not seem to be any difference between the two groups.

No difference is shown in the number of miscarriages, premature and stillbirths in the families of the two groups. Length of pregnancy is the same, both the Mongolian and Control children usually being born at full term.

Recently the idea has arisen that irradiation of the mother during the time of pregnancy might cause Mongolism in the offspring.

Several cases have been cited in the literature where a Mongolian child has been born following treatment of this nature. However, the records of these Mongolians give no indication of such an etiology.

TABLE 6.

AGE OF WALKING

	Youngest	Median	Oldest
Mongolians	1.5 years	3.3 years	9.0 years
Controls	1.0 years	2.6 years	7.0 years

AGE OF TALKING

	Youngest	Median	Oldest
Mongolians	1.5 years	4.2 years	10.0 years
Controls	1.0 years	2.8 years	8.0 years

These Mongolians are more retarded than the Control children in learning to walk and talk. There is a comparative difference of about two thirds of a year in the age of walking and about one and one-half years in the age of talking. Specifically, these Mongolians walked at three and one-third years, and talked at slightly over four years of age.

SUMMARY

(1) From the standpoint of the frequency of occurrence of Mongolian traits, this study shows that eyes which slant up and out ranks first, followed in order by straight hair, placid expression, protruding abdomen, almond-shaped eyes, fissured tongue, epicanthus, puffy eyelids, hyperflexible joints, poor posture, fissured lips, flattened occiput, drooped corners of mouth, straight forehead, irregularly formed teeth, dry and chapped skin, low-pitched voice, wrinkled forehead, depressed nasal bridge, short fingers, dry nails, open mouth, pointed tongue, broad and thick tongue, coarse voice, unusually long tongue, deeply fissured tongue, hypotonic muscles, fleshy cushions on shoulders, and transversely fissured tongue.

(2) When these traits are ranked differentially by combining their frequency of occurrence in both the Mongolian and feeble-minded Control groups, almond-shaped eyes is most significant, fol-

lowed in order by flattened occiput, depressed nasal bridge, pointed tongue, unusually long tongue, deeply fissured tongue, somewhat depressed nasal bridge, transversely fissured tongue, hyperflexible joints, tailor's posture, shallow eye-socket, very wide distance between eyes, chapped hands, dry skin, many fissures in tongue, thick lips, epicanthus, puffy eyelids, thick tongue, broad tongue, coarse voice, small ears, transversely fissured lips, hypotonic muscles, drooped corners of mouth, lower jaw thrust forward, fissured tongue, bright red tongue, protruding tongue, and shambling gait.

(3) Mentally, these Mongolians are low-grade imbeciles. Other investigations confirm this fact.

(4) These Mongolians are at least 4 years more retarded in height than their Controls. Considering their height, they are also comparatively overweight. The girls deviate more with respect to height than do the boys, and are heavier in comparison to their height than are the boys. Both boys and girls have relatively longer trunks than the Controls.

(5) These Mongolians have smaller heads than their Controls of similar ages and mental ages. They approximate microcephaly. Their cranial capacity is less than that of normal 6-year-old children. Their heads are brachycephalic with flattened occiputs.

(6) Subjectively, differences in behavior and disposition are recognizable in these two groups of children. These observations favor the Mongolians. Systematic scoring, however, does not reveal the nature of these differences.

(7) The parents of these Mongolian children are older at birth of the children than the parents of the feeble-minded children who are not Mongolian. There is a comparative difference of at least 4 years in the ages of the mothers, and 7 years in the ages of the fathers, both tending toward later age at birth of the children. The typical mother is 34 years old, and the typical father 38 years old at the birth of the Mongolian child.

(8) There is a significant difference in the percentage of these Mongolians who are last born children as compared with the Controls. The families of the Controls are greater in size than the families containing the Mongolian children.

(9) No nationality differences are found in these two groups.

(10) No differences in number of miscarriages, premature and still births, or in the length of pregnancy are found in the two groups.

(11) There is no reason to suspect irradiation as a possible etiological factor from a study of the records of these cases.

(12) These Mongolians are retarded more than other feeble-minded children in learning to walk and talk. The typical Mongolian walked at three and one-third years, and learned to talk about a year later, namely after four years of age.

This differential description of the symptom-complex of the Mongolian type of mental deficiency may offer to those engaged in the field of human pathology some fruitful suggestions concerning the etiology of this important condition.

Peter is Here

Helen F. Hill

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On a very rainy morning last week I chanced to be sitting beside the hostess in a school devoted to the care and training of mentally deficient children when the telephone on her desk rang. Answering it she smiled and said, "Yes, I will be right down." To me she said, "We have a guest from California, would you like to go with me to meet him?"

When we entered the reception room of the Administration Building we saw the erect figure of a man standing at the window, as we approached he turned with that rare charm only to found in men who have lived long and have learned Life's lessons well. As he extended his hand his manner and voice bespoke interest and sympathy. "For many years I have known and read of your School," he said, "Yesterday, I visited one of the greatest scientists in the country and through him I am here today." He hesitated, "I have raised seven children. Marigold, my youngest daughter, is twenty-eight and married to a fine young man in the West. I have just visited their home,"—again he paused for an instant but went firmly on—"Her one little seven year old son is mentally deficient, a nervous little fellow quite uncontrolled in the home. During my visit I became convinced that the training of normal home surroundings can never meet the needs of this little grandson of mine. I felt,

too, that it was for me to lead these young parents and their little boy, Peter, to the doors of this institution, so I pursuaded my daughter to go with me to the eminent specialist of whom I have just told you, and there the boy was examined, tested, and studied. I have here the report that he made, and a letter of introduction—to you all. He has told me of the mental age, the intelligence-quotient, and many other results of the examination. Of all this I have but little understanding, but this wonderful man had a far greater gift than his knowledge of science—the understanding of human hearts. 'Your little boy would be very happy at The Training School at Vineland, for it is a place where they believe that happiness comes first and all else follows,' he said to my daughter. With a very searching look he said, "Young woman, is that true?" The hostess wise with many years of experience in meeting this same question said, "It is lunch time now—after that well—I think we will let our boys and girls answer your question."

I happened to sit at the table with this guest, and to see his keen, eager interest in every person in the room. He turned to the young Southern girl at his left with the query, "What do you do here, are you happy in your work?" Or to the young student on his right, "What brought you into this work and do you find it of interest, will you remain?"

Later I saw him going about the grounds with the hostess from cottage to cottage where he talked with the housemothers and saw the children at play. He displayed an intelligent understanding of the training and care that is necessary for a group of such children. But always he managed to ply his question tactfully, "Are you happy here?" They stopped to speak to youngsters they met on the way. "Hello son, what are you doing? Do you like your job?"

They went on to visit the school department and to meet the principal and later again to talk to the superintendent. Several hours later I saw him as he was leaving for his train. It seemed to me that he looked a bit younger, some of the anxiety had gone from his eyes when he said "Good-bye."

* * * * * * * * *

Yesterday, ten days later, I chanced to be crossing the lawn when the occupants of the auto drawn up to the curb were mounting the steps to the front door—The young woman reaching out her hand said to the little boy, "This way Peter." Instinctively I knew

that this beautiful young woman was Marigold, "the youngest daughter" with her strong, clear eyed young husband, and her little boy Peter, who had been led across the continent by the judgment, council, and love of a wise parent to this door of opportunity for their only son. These parents were met as the father had been by happy young men and women and by those who had been long years in the work, and little Peter became a member of the family.

What were these fine, honest young people really seeking for their child? When the mother was leaving she said, "You will wire us early in the morning, won't you? I just want to know that Peter is happy." And the wise woman who answered "Yes, indeed," knew so well that all else will follow.

A New Department Established

In 1902 one of Dr. Johnstone's friends remarked that The Training School reminded him of "a human laboratory, a garden where unfortunate children can be cared for, protected and loved, while they unconsciously whisper syllable by syllable the secrets of the Soul's growth. It may very well be that the most ignorant shall teach us most."*

That idea took hold of Dr. Johnstone's imagination and in 1906 the Laboratory became a reality—a laboratory where learned scientists could delve deeper into the mysteries of the causes and effects of feeble-mindedness.

For twenty-three years the work of this Laboratory has gone on, probing into the problems of mental deficiency. It has an international reputation. The findings of its work have brought real results in the care and training of subnormal children and through these, have helped in the care and training of normal children. What results longer years of labor will bring no one can estimate. We only know that humanity will be benefitted.

Through all of these years the financing of this work has been a serious problem, and strain on The Training School at times when private gifts were not sufficient to carry the work. But never was there an idea of giving up. The work had to go on by reason of its necessity.

* Dr. Earl Barnes.

Now its worth is proven.

The Trustees of The Training School feel that the time has come when the Laboratory should be endowed, so that the School may put its resources into other needed lines, such as new buildings and equipment. So a new department has been created, with a definite aim of arousing such interest in the Laboratory and its research, that funds for its maintenance and endowment will come.

A friend said recently, upon learning that we were organizing for this, "Now isn't that queer? It never occurred to me that the School actually needed money—everything always seems to be going so smoothly. I suppose I always thought it came like Manna from Heaven. My check will be ready now though, when you want it."

Are you one who thought as she did?

CLARRETT SEHON
Committee on Research and Provision.
Executive Secretary

Book Review

WALLIN, J. E. WALLACE. *Clinical and Abnormal Psychology. A Textbook for Educators, Psychologists and Mental Hygiene Workers.* Boston, Houghton Mifflin Company, 1927. 649 pp.

As the result of many years of practical and varied experience Wallin has written this substantial volume covering the field of clinical psychology in a most comprehensive manner.

The work is divided into four main parts, Introduction, Intelligence, Motility and Emotivity, presented in twenty-four chapters. The author limits his principal treatment to an elaborate consideratiion of one field of the six which he considers basic in studying mentally deviating school children, namely that of the mental examination.

In the Introduction he defines the field of clinical psychology, its limitations and scope, and develops certain basic principles. Part II on Intelligence, one of the most valuable sections, deals with some theories of intelligence that have been advanced, and sets forth the author's own conception that "intelligence is a complex of lower and higher cognitive activities." Part III, Motility, is concerned with motor efficiency—reflex arc, instincts, conditioned reflexes and the

laboratory investigation of motor capacity. Part IV, Emotivity, completes the volume with a consideration of the non-intellectual and non-motor functions. An Appendix giving data as to the reliability of group tests, an excellent Bibliography of scales, treatises, etc., and a carefully worked out Index completes the work.

In general, the volume is an exceedingly worth-while contribution to the inadequately covered field of clinical psychology. The author, who is a veritable encyclopedia of information and one of the pioneers widely acquainted with the field, covers the subject in an admirable manner. There is a tendency toward wordiness which seems to limit the extent of the treatment. For example, a less extensive consideration of certain phases might have allowed the inclusion of a section on evaluation, the use of the material from the other fields and the writing of case reports. As it is, the novice will unfortunately be apt to consider this book of seven hundred pages a compendium when in reality it should be accepted as one of a series of volumes. Let us hope that this author, or some one equally qualified, will continue the evidently necessary work of building a library on clinical psychology.

This book is the best of its type yet produced. It should prove to be an excellent aid, not especially as a text, but as a reference book in college courses and active clinics.

Vineland, N. J. LLOYD N. YEPSEN.

Institutional Notes

The forty-first annual meeting of The Training School Association was held Wednesday, June 12th. A larger number were in attendance than at any previous meeting. The reports of the various departments showed the record of a prosperous year.

Mr. Branson spoke of the various improvements which have been made. He told of the new cottage which is now under way for small boys. This will be known as the Anna W. Hutchinson Cottage in honor of Miss Hutchinson who has been connected with the work of The Training School in the Boys' Department for forty-one years. He also spoke of the legacy of $20,000 recently received to be used in erecting a cottage for girls in memory of Josephine De Mott. The dairy is being moved to Menantico Colony.

Mrs. Howard Hancock in her report gave an interesting history of various members of the board.

Mr. Nash gave the statistical report showing that there are now five hundred and thirty-three children enrolled.

Professor Johnstone spoke of the advanced lines of child study which are being carried on.

Lloyd N. Yepsen, who has been connected with our Research Department for the past seven years, left with his family for South America on Thursday, May 30th. They sailed from Brooklyn, N. Y., on the S. S. Teno of the South American Steamship Company by way of the Panama Canal.

Mr. Yepsen will take up his work with the Chilean Minister of Education. This covers an extensive program in the interest of education for the defectives of that country. Mr. Yepsen has been granted a year's leave of absence to do this work.

The camp season opened June 13th with a lively group of girls from Moore Cottage. Two groups of eighteen boys each from Branson enjoyed several days. The Mills boys will have their outing this week.

Our Summer School will open July 8th. The class is now filled. The students represent the following States: California, Connecticut, District of Columbia, Illinois, Indiana, Kansas, Maryland, Minnesota, New Hampshire, New Jersey, Ohio, Pennsylvania, Tennesee, Virginia, Washington and West Virginia.

There will be no issues of the Bulletin during July and August.